#### Case 1:21-bk-10214-MB Doc 48 Filed 02/23/21 Entered 02/23/21 11:34:29 Desc Main Document Page 1 of 46

Fill in this infor	mation to identify your	case:		
Debtor 1	James Alexander	,		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT C	PF CALIFORNIA - SAN FERNANDO	
Case number	1:21-bk-10214-MB			
(if known)				☐ Check if this is amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

	ormation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend or original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ed sched	lules after you file
Pa	rt 1: Summarize Your Assets		
			assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	1,260,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	757,433.56
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,017,433.56
Pa	rt 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,058,576.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	255,564.44
	Your total liabilities	\$	1,314,140.44
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$_	0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	15,000.16
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	James Alexander			Case number (if known)	1:21-bk-10	)214-MB

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	า
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total</b> . Add lines 9a through 9f.	\$	0.00

	Case 1:21-	DK-TO		oc 48 //ain D	Document Page 3 of 46	JZ1Z31Z	1 11:34:2	29 Desc
Fill in thi	is information to	identify	your case and th					
Debtor 1	Jame	es Alexa	ander					
Oobtor 2	First Na	me	Middle	e Name	Last Name			
Debtor 2 Spouse, if f		ime	Middle	e Name	Last Name			
Jnited St	tates Bankruptcy	Court for	the: CENTRAL	DISTRI	CT OF CALIFORNIA - SAN FERNANDO			
Case nur	mber							☐ Check if this is an
								amended filing
Schen each cath	best. Be as comp	B: Pr	roperty lescribe items. List accurate as possible	le. If two	only once. If an asset fits in more than one c married people are filing together, both are e nis form. On the top of any additional pages, v	qually respo	onsible for su	plying correct
		· I	71 17		Estate You Own or Have an Interest In			
1.1 _ <b>355</b>	Where is the proper to the pro	n Pl.	cription	What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	ms or exemptions. Put claims on Schedule D: as Secured by Property.
She	erman Oaks	CA	91423-0000		Manufactured or mobile home	Current val	erty?	Current value of the portion you own?
City		State	ZIP Code		Investment property Timeshare	\$1,26	0,000.00	\$1,260,000.00
					Other  has an interest in the property? Check one Debtor 1 only	(such as fe	e simple, tena e), if known.	our ownership interest ncy by the entireties, or
	s Angeles				Debtor 2 only			
Coun	nty				Debtor 1 and Debtor 2 only  At least one of the debtors and another		if this is com	munity property
				Other	r information you wish to add about this item, erty identification number:	`	,	
					your entries from Part 1, including any e r here		=>	\$1,260,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 1:21-bk-10214-MB Doc 48 Filed 02/23/21 Entered 02/23/21 11:34:29 Page 4 of 46 Main Document Debtor 1 Case number (if known) **James Alexander** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Mercedes 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: E350 Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only Year: 2012 Debtor 2 only Current value of the Current value of the 69,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$13,000.00 \$13,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,000.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B

■ Yes. Describe.....

Schedule A/B: Property

Misc household goods and furnishings:Hot water heater \$100

Debtor 1 **James Alexander** 

> Washer/Dryer \$743 Ikea Baby Cribs \$100

Couch \$100 Mirror Consol \$100 Office desk \$100 Paddad abairs v4 \$100 Case number (if known)

Wood chairs x2 \$100 Childrens toys \$100 Linens \$100 Kitchen table \$100 Kitchen chairs x4 \$100 Kitchen buffet \$100 Misc. Kitchenware \$100 Photo frames family photos x16 \$100 Flatware \$100 Kitchen counter-top appliances \$100 Dishwasher \$100 Refrigerator \$100 Stove/Oven \$100 Installed Shelving \$100 Pantry foodstuff \$100 Beds 2x \$100 Large sitting chairs x2 \$100 Side tables x4 \$100 Gun safes x3 \$100 Standing lamps x2 \$100 Misc. House. Goods \$100	\$3,543.00
<ul> <li>Electronics</li> <li>Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanincluding cell phones, cameras, media players, games</li> <li>□ No</li> <li>■ Yes. Describe</li> </ul>	nners; music collections; electronic devices
Misc electronics at home:	\$2,096.00
Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art object other collections, memorabilia, collectibles  □ No  ■ Yes. Describe	
 MIsc pictures and artwork	\$1,100.00
<b>Equipment for sports and hobbies</b> Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs	, skis; canoes and kayaks; carpentry tools;

#### 10. Firearms

□ No

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Household games and sports equipment

□ No

Yes. Describe.....

Yes. Describe.....

\$800.00

musical instruments

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De	ebtor 1	James Alexa	ander		Case number (if kn	own)
			AR15	M4, Smith & Wesson	38 and ammunition	\$2,119.00
11.	□ No Î				wear, shoes, accessories	
			Misc o	lothes at home: Used	clothing	\$100.00
	■ No		welry, cos	stume jewelry, engageme	nt rings, wedding rings, heirloom jewelry, watches, ge	ms, gold, silver
	Exampl ■ No	m animals les: Dogs, cats, Describe	birds, hor	ses		
	■ No	er personal an		-	Iready list, including any health aids you did not li	st
15				•	including any entries for pages you have attached	d \$9,758.00
		cribe Your Finan n or have any I		s quitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No			our wallet, in your home, i	n a safe deposit box, and on hand when you file your	petition
					certificates of deposit; shares in credit unions, broker the same institution, list each.	age houses, and other similar
	■ Yes				Institution name:	
			17.1.	Other financial account	Funds on deposit with JP Morgan Chase (x6006)	\$93,197.34
			17.2.		Wells Fargo account ending x9285	\$246.84
			17.3.		Wells Fargo Account ending x1923	\$480.71
			17.4.	Checking Account	DIP Wells Fargo Account ending x0816	\$121,484.00
			17.5.	Joint checking account	Wells Fargo joint x2155	\$6,140.04

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Debtor 1 Case number (if known) James Alexander Savings Other Wells Fargo \$700.00 17.6. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: CircleUp \$3.347.36 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **IRA Etrade** \$22,212.34 **IRA** Personal Capital: X6555 \$59,186.54 **IRA** Personal Capital; X7330 \$78,591.12 401(k) Sequoia One (Mass. Mutual) \$50,640.27 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

Official Form 106A/B Schedule A/B: Property page 5

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26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property  Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	■ No □ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	■ No □ Yes. Give specific information about them	
М	oney or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you  ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
	Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett  ■ No  □ Yes. Give specific information	lement
	Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else  ■ No  □ Yes. Give specific information	ion, Social Security
	Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No	
	Yes. Name the insurance company of each policy and list its value.  Company name:  Beneficiary:	Surrender or refund value:
	Northwestern Mutual term life	
	insurance Unknown	Unknown
	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive someone has died.  ■ No □ Yes. Give specific information	property because
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  □ No ■ Yes. Describe each claim	
	Cred Capital, Inc. D&O or E&O Insurance	\$250,000.00
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set	off claims
	■ No □ Yes. Describe each claim	
	Any financial assets you did not already list □ No	
	Yes. Give specific information.	

Debtor 1

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Debtor 1	James Alexander Case number (if kno	wn)
	LBA tokens 4,374,799 and BTC token 1	\$47,449.00
	the dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$733,675.56
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	own or have any legal or equitable interest in any business-related property? o to Part 6.	
_	Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38. <b>Acco</b> u	ints receivable or commissions you already earned	
■ No □ Yes	Describe	
Exam ■ No	equipment, furnishings, and supplies  ples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, de  Describe	sks, chairs, electronic devices
□ No	nery, fixtures, equipment, supplies you use in business, and tools of your trade  Describe	
	misc computer and electronics	\$1,000.00
41. <b>Invent</b> ■ No □ Yes	Describe	
42. <b>Intere</b> : ■ No	sts in partnerships or joint ventures	
	Give specific information about them  Name of entity:  % of ownership:	
43. <b>Custo</b> ■ <sub>No.</sub>	mer lists, mailing lists, or other compilations	
☐ Do yo	our lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	■ No □ Yes. Describe	
■ No	usiness-related property you did not already list  Give specific information	

Official Form 106A/B Schedule A/B: Property page 7

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Deb	tor 1	James Alexander	eni Paye 10	Case number (if known)	
45.		the dollar value of all of your entries from Part 5, includ art 5. Write that number here			\$1,000.00
Part		scribe Any Farm- and Commercial Fishing-Related Property Yorou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Intere	st In.	
		u own or have any legal or equitable interest in any farm	n- or commercial fishir	ng-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	s. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
		have other property of any kind you did not already lis	st?		
	<i>Exam</i> µ I No	oles: Season tickets, country club membership			
		Give specific information			
_	1 103.	Give specific information			
54.	Add t	the dollar value of all of your entries from Part 7. Write t	that number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part '	1: Total real estate, line 2			\$1,260,000.00
56.	Part 2	2: Total vehicles, line 5	\$13,000.00	_	
57.	Part 3	3: Total personal and household items, line 15	\$9,758.00		
58.	Part 4	4: Total financial assets, line 36	\$733,675.56		
59.	Part 5	5: Total business-related property, line 45	\$1,000.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+ \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$757,433.56	Copy personal property total	\$757,433.56

Official Form 106A/B Schedule A/B: Property page 8

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,017,433.56

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Fill in this infor	rmation to identify your	case:		
Debtor 1	James Alexande	•		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA - SAN FERNA	ANDO
Case number (if known)				☐ Check if this is a amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited

Part 1: Identify the Property You Claim as Exen	npt
---	-----

	ne applicable statutory amount.				
Pa	rt 1: Identify the Property You Claim as Ex	xempt			
1.	Which set of exemptions are you claiming?	P Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonbank	cruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	3551 Dixie Canyon Pl. Sherman Oaks, CA 91423 Los Angeles County	\$1,260,000.00	•	\$600,000.00	C.C.P. § 704.730
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2012 Mercedes E350 69,000 miles Line from Schedule A/B: 3.1	\$13,000.00	•	\$3,325.00	C.C.P. § 704.010
	Line Holli Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
	Misc household goods and	\$3,543.00		100%	C.C.P. § 704.020
	furnishings:Hot water heater \$100 Washer/Dryer \$743 Ikea Baby Cribs \$100 Couch \$100 Mirror Consol \$100 Office desk \$100			100% of fair market value, up to any applicable statutory limit	

Line from Schedule A/B: 6.1

Padded chairs x4 \$100 Wood chairs x2 \$100 Childrens toys \$100 Linens \$100 Kitchen

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Main Document Page 12 of 46 Debtor 1 James Alexander Case number (if known) Amount of the exemption you claim Brief description of the property and line on Current value of the Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Misc electronics at home: C.C.P. § 704.020 100% \$2,096.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit MIsc pictures and artwork C.C.P. § 704.040 100% \$1,100.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit C.C.P. § 704.020 Household games and sports 100% \$800.00 equipment Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit AR15 M4, Smith & Wesson 38 and C.C.P. § 704.020 100% \$2,119.00 ammunition 100% of fair market value, up to Line from Schedule A/B: 10.1 any applicable statutory limit Misc clothes at home: Used clothing C.C.P. § 704.020 \$100.00 100% Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit IRA: Etrade \$22,212,34 C.C.P. § 704.115(a)(1) & (2), Line from Schedule A/B: 21.1 (b) 100% of fair market value, up to any applicable statutory limit IRA: Personal Capital; X6555 C.C.P. § 704.115(a)(1) & (2), \$59,186.54 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit IRA: Personal Capital; X7330 C.C.P. § 704.115(a)(1) & (2), \$78,591.12 Line from Schedule A/B: 21.3 (b) 100% of fair market value, up to any applicable statutory limit 401(k): Sequoia One (Mass. Mutual) C.C.P. § 704.115(a)(1) & (2), \$50,640.27 Line from Schedule A/B: 21.4 100% of fair market value, up to any applicable statutory limit Northwestern Mutual term life C.C.P. § 704.100(a) Unknown 0% insurance Beneficiary: Unknown 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit misc computer and electronics C.C.P. § 704.060 \$1,000.00 Line from Schedule A/B: 40.1 100% of fair market value, up to any applicable statutory limit

\$1,000.00

misc computer and electronics

Line from Schedule A/B: 40.1

C.C.P. § 704.020

0%

100% of fair market value, up to any applicable statutory limit

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		Main Document	Page	14 01 46		
Fill in this information to ide	entify your	case:				
Debtor 1 James A	Alexander	•				
First Name	полинио	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Cou	urt for the:	CENTRAL DISTRICT OF CALI	FORNIA - SA	N FERNANDO		
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form 100D						
Official Form 106D			_			
Schedule D: Cred	ditors	Who Have Claims :	Secure	d by Property	У	12/15
		two married people are filing togethout, number the entries, and attach it t				
1. Do any creditors have claims s	secured by y	our property?				
□ No. Check this box and	d submit this	s form to the court with your other	schedules. Y	ou have nothing else to	report on this form.	
Yes. Fill in all of the infe	ormation be	elow.				
Part 1: List All Secured C	laims					
		ore than one secured claim, list the cree	ditor congratoly	, Column A	Column B	Column C
for each claim. If more than one of	creditor has a	particular claim, list the other creditors	s in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in	n alphabetica	Il order according to the creditor's name	∍.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 JP Morgan Chase		Describe the property that secures t	he claim:	\$65,000.00	\$93,197.34	\$0.00
Creditor's Name		Other financial account: Fur				
		deposit with JP Morgan Cha	se			
		(x6006) As of the date you file, the claim is: (	Check all that			
		apply.	JIIOOK all tilat			
		Contingent				
Number, Street, City, State & Zip		Unliquidated				
Who owes the debt? Check on		☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as r	mortango or co	cured		
Debtor 2 only		car loan)	nortgage or set	cureu		
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the debtors and		☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to		Other (including a right to offset)				
community debt						
Date debt was incurred		Last 4 digits of account number	per			
and IDMOD HOME				<b>****</b>	44 000 000 00	<b>**</b>
2.2 JPMCB HOME  Creditor's Name		Describe the property that secures t		\$993,576.00	\$1,260,000.00	\$0.00
Creditor o rearrie		3551 Dixie Canyon Pl. Shern Oaks, CA 91423  Los Angele				
		County				
700 KANSAS LN	_	As of the date you file, the claim is:	Check all that			
Monroe, LA 71203		apply. Contingent				
Number, Street, City, State & Zip		☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check on	e.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as r	nortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, med	hanic's lien)			
At least one of the debtors and		U Judgment lien from a lawsuit				
☐ Check if this claim relates to	а	Other (including a right to offset)				
community debt						
Date debt was incurred		Last 4 digits of account numb	er			

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Debtor 1 James Alexander	C	Case number (if known)		
First Name Middle N	ame Last Name			
Los Angeles County Tax Collector	Describe the property that secures the claim:	Unknown	\$1,260,000.00	Unknown
Creditor's Name	3551 Dixie Canyon Pl. Sherman Oaks, CA 91423 Los Angeles			
P.O. Box 54018 Los Angeles, CA 90054-0018	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	column A on this page. Write that number here:	\$1,058,576	.00	
If this is the last page of your form, add	the dollar value totals from all pages.	\$1,058,576	.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			M	aın Documei	nt Page 16 (	of 46				
Fil	I in this informa	ation to identify your	case:							
De	ebtor 1	James Alexander								
		First Name	Middle	Name	Last Name					
	ebtor 2 ouse if, filing)	First Name	Middle	e Name	Last Name					
Un	ited States Bank	cruptcy Court for the:	CENTRAL	_ DISTRICT OF CA	ALIFORNIA - SAN FEF	RNANDO				
	nse number nown)								if this is ar ed filing	n
	ficial Form	106E/F F: Creditors W	ho Hav	e Unsecure	d Claims				12/15	5
any Sch Sch left.	executory contra edule G: Executo edule D: Creditors	accurate as possible. Us cts or unexpired leases ry Contracts and Unexpi s Who Have Claims Seci nuation Page to this pag per (if known).	that could re ired Leases ( ured by Prop	esult in a claim. Also (Official Form 106G) perty. If more space i	o list executory contract.  Do not include any cre is needed, copy the Par	ts on Schedule A/B: I editors with partially s t you need, fill it out,	Property (Of secured clai number the	fficial For ims that a entries in	m 106A/B) a re listed in n the boxes	and on
Pa	rt 1: List All	of Your PRIORITY Un	secured Cl	aims						
1.	Do any creditors	have priority unsecured	d claims aga	inst you?						
	☐ No. Go to Par	t 2.								
	Yes.									
2.	identify what type possible, list the c	riority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both priority er according to	and nonpriority amount the creditor's name.	unts, list that claim here a If you have more than tw	and show both priority a	and nonprior	ity amount	s. As much	as
		on of each type of claim, s								
	,				·	Total claim	Priority amount		Nonpriorit amount	ty
2.1	Franchise Priority Cred	e Tax Board		Last 4 digits of acco	ount number	\$0.00		\$0.00		\$0.00
	Special P POB 2952	Procedures		When was the debt	incurred?		_			
	Number Stre	eet City State Zip Code		As of the date you f	ile, the claim is: Check a	all that apply				
	Who incurred t	he debt? Check one.		☐ Contingent						
	Debtor 1 only	у		☐ Unliquidated						
	Debtor 2 onl	у		☐ Disputed						
	Debtor 1 and	d Debtor 2 only		Type of PRIORITY u	ınsecured claim:					
	☐ At least one	of the debtors and anothe	er	☐ Domestic support	t obligations					
	☐ Check if this	s claim is for a commun	nity debt	■ Taxes and certain	n other debts you owe the	government				
	Is the claim sul		•	_	or personal injury while yo	•				
	■ No			☐ Other. Specify						
	☐ Yes				For totice purpose	s only				

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Debt	or 1 James Alexander	Case number (if known)	
2.2	Internal Revenue Service	Last 4 digits of account number \$0.00	\$0.00 \$0.00
	Priority Creditor's Name Insolvency I Stop 5022 300 N. Los Angeles St., #4062 Los Angeles, CA 90012-9903	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	□ Unliquidated	
	☐ Debtor 2 only	□ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Domestic support obligations	
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
	■ No	☐ Other. Specify	
	☐ Yes	For notice purposes only	
<b>4. L</b> u tr	nsecured claim, list the creditor separately for each cl nan one creditor holds a particular claim, list the other	alphabetical order of the creditor who holds each claim. If a creditor has more th aim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
Р	art 2.		Total claim
4.1	Barclay's Bank Delaware	Last 4 digits of account number	\$3,575.43
	Nonpriority Creditor's Name PO BOX 8803	When was the debt incurred?	
	Wilmington, DE 19899	Then was the dest mounted.	_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card	

Debto	James Alexander	Case number (if known)	
4.2	Buchanon Ingersoll Rooney	Last 4 digits of account number	\$104,711.01
	Nonpriority Creditor's Name 919 North Market Street, Suite 990 Wilmington, DE 19801	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Legal fees	
4.3	Capital One Bank USA	Last 4 digits of account number	\$347.00
	Nonpriority Creditor's Name PO BOX 31293 Salt Lake City, UT 84131	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
4.4	Citicard	Last 4 digits of account number	\$1,513.00
	Nonpriority Creditor's Name PO BOX 6241	When was the debt incurred?	
	Sioux Falls, SD 57117	When was the destinicalied:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify credit card	

Debu	James Alexander	Case number (if known)	
4.5	Cred Inc. et al,	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Scott Cousins, Esq. 1521 Concord Pike, Suite 301 Wilmington, DE 19803	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Pending bankruptcy cases	
4.6	Discover Student Loans Nonpriority Creditor's Name	Last 4 digits of account number	\$86,000.00
	PO BOX 30948 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Student loans	
4.7	SOFI	Last 4 digits of account number	\$4,438.00
	Nonpriority Creditor's Name  2750 E COTTONWOOD PKWY	When was the debt incurred?	
	Salt Lake City, UT 84121  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify unsecured loan	

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Debto	James Alexander	Case number (if known)	
4.8	US Bank	Last 4 digits of account number	\$15,314.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO BOX 13 Hillsboro, OH 45133	when was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Auto Lease	
4.9	USAA	Last 4 digits of account number	\$1,471.00
	Nonpriority Creditor's Name	<del></del>	. ,
	PO BOX 47504	When was the debt incurred?	
	San Antonio, TX 78265  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the stain is. Shook an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	_	·	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	
		- Officer, Specify	
4.1 0	Wells Fargo Bank	Last 4 digits of account number	\$32,260.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO BOX 14517 Des Moines, IA 50306	when was the dept incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify credit card	

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		Main Document	Page 21 of 46	
Debtor 1	James Alexander		Case number (if known)	

WF Credit Services	Last 4 digits of account number	\$5,935.00
Nonpriority Creditor's Name PO BOX 14517	When was the debt incurred?	
Des Moines, IA 50306  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit card	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	, , , , , , , , , , , , , , , , , , , ,	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 255,564.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 255,564.44

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	mation to identify your	case:		
Debtor 1	James Alexander	ſ		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	CENTRAL DISTRICT C	F CALIFORNIA - SAN FERNANI	DO
Case number				
(if known)				

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

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		Main Docui	ment Page 23	3 01 46	
Fill in this	information to identify your	case:			
Debtor 1					
Debior 1	James Alexande First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	rg) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	CENTRAL DISTRICT C	F CALIFORNIA - SAN F	ERNANDO	
Coco numb	oor.				
Case numb (if known)	Dei				☐ Check if this is an
					amended filing
					C
Official	Form 106H				
		labtara			
<u>scnea</u>	ule H: Your Cod	eptors			12/15
■ No □ Yes  2. With Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.	u <b>lived in a community pr</b> , Nevada, New Mexico, Pu	roperty state or territory erto Rico, Texas, Washi	<b>y?</b> (Community property	states and territories include
in line Form 1 out Co	2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	sure you have listed the 6G). Use Schedule D, S	with you. List the person shown a creditor on Schedule D (Official schedule E/F, or Schedule G to fill littor to whom you owe the debt
				Crieck all scriedules	тнасарріу.
3.1				☐ Schedule D, line	
<u> </u>	Name			Schedule E/F, lin	ne
				☐ Schedule G, line	
_	Normal and Other at			=	
	Number Street City	State	ZIP Code		
(	Oity	Glale	ZIF COUE		
				Пол	
3.2	Name			Schedule D, line	
ŗ	vanio			☐ Schedule E/F, lin	
				☐ Schedule G, line	
1	Number Street			_	
(	City	State	ZIP Code		

	in this information to identify your of	ase:	<u></u>						
Deb	otor 1 James Alex	ander							
	otor 2				_				
Uni	ted States Bankruptcy Court for the	E: CENTRAL DISTRICT FERNANDO	OF CALIFORNIA - S	SAN					
	se number lown)						•		
<u>O</u> 1	fficial Form 106I					MM / DD/ Y	<del>/YYY</del>		
So	chedule I: Your Inc	ome						12/15	
sup <sub>l</sub> spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1:	are married and not filir ur spouse is not filing wi On the top of any addition	ng jointly, and your : th you, do not inclu	spouse is de inforn	living wation at	vith you, incl oout your spo	ude information about ouse. If more space is	ut your s needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing spous	e	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed				□ Employed □ Not employed		
	information about additional employers.	Occupation	■ Not employed			⊔ Not e	mployed		
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed th	nere?						
Par	t 2: Give Details About Mo	nthly Income							
spou f yo	mate monthly income as of the cuse unless you are separated.  u or your non-filing spouse have m	ore than one employer, co						-	
nore	e space, attach a separate sheet to	o this form.			For	Debtor 1	For Debtor 2 or		
					101	Debtor 1	non-filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	<u> </u>	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$N/A	<u>\</u>	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$N/A		

Debto	or 1	James Alexander	•	(	Case n	iumber ( <i>if k</i>	nowr	ı) -				
	_					Debtor 1			non-	Debtor :	pouse	
	Cop	by line 4 here	4.		\$		0.0	<u>)</u>	\$		N/A	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	(	0.0	0	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$	(	0.0	<u>D</u>	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50	<b>)</b> .	\$	(	0.0	)	\$		N/A	
	5d.	Required repayments of retirement fund loans	50		\$		0.0	_	\$		N/A	
	5e.	Insurance	5e		\$		0.0	_	\$		N/A	
	5f.	Domestic support obligations	5f.		\$		0.0	_	\$		N/A	
	5g.	Union dues	5g	•	\$ _		0.0		—		N/A	
	5h.	Other deductions. Specify:	_	1.+	· —			0 -			N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.0	<u>)                                    </u>	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.0	)	\$		N/A	
	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	88		\$	(	0.0	)	\$		N/A	
	8b.	Interest and dividends	8b	Ο.	\$	(	0.0	)	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		0.0	_	\$		N/A	
	8d.	Unemployment compensation	80		\$		0.0	_	\$		N/A	
	8e.	Social Security	86	€.	\$		0.0	)	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	(	0.0	0_	\$		N/A	
	8g.	Pension or retirement income	80	-	\$		0.0	_	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$		0.0	0 +	- \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$		0.0	0	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		0.00	_	\$		N/A	= \$	0.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		0.00		Ψ_		11//	-	0.00
11.	Stat Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depe							chedule 11.		0.00
		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies								12.	\$	0.00
13	Do :	you expect an increase or decrease within the year after you file this form	2							L	Combine monthly	
		No.	•									

Fill i	n this informa	tion to identify yo	ur case:					
Debt	or 1	James Alexa	nder			Chec	k if this is:	
Debt	or 2					_	An amended filing A supplement show	wing postpetition chapter
(Spo	use, if filing)							the following date:
Unite	ed States Bankr	uptcy Court for the:	CENTR FERNA	AL DISTRICT OF CALIFO	DRNIA - SAN	-	MM / DD / YYYY	
	e number nown)							
		rm 106J						
		J: Your I		<b>ISES</b> . If two married people ar				12/
	Describe this a join No. Go to	n). Answer ever libe Your House nt case? b line 2. s Debtor 2 live i	y questio hold n a separ					our name and case
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents				child		1.5	□ No ■ Yes
					Child		1.5	□ No ■ Yes □ No □ Yes □ No
3.	expenses o	penses include f people other the d your depender	nan $_{\square}$	No Yes				☐ Yes
Esti expe	mate your ex		ur bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance and		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	4. \$		4,885.27
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		1,312.50
	•	rty, homeowner's				4b. \$		180.96
		maintenance, re owner's associati		ıpkeep expenses dominium dues		4c. \$ 4d. \$		1,150.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Debtor 1 James Alexander		Case numl	per (if known)	
6. Utilities:				
6a. Electricity, heat, natur	ral gas	6a.	\$	554.46
6b. Water, sewer, garbag	•	6b.	\$	0.00
	e, Internet, satellite, and cable services	6c.	\$	490.00
6d. Other. Specify:	o, momo, catomo, and capie connece	6d.	\$	0.00
Food and housekeeping s	sunnlies	7.	\$	1,300.00
Childcare and children's	• •	8.	\$	0.00
Clothing, laundry, and dry		9.	\$	100.00
Personal care products a		10.	\$	100.00
. Medical and dental expens		11.	\$	
•	ses maintenance, bus or train fare.	11.	Ψ	380.00
Do not include car payment		12.	\$	560.00
	reation, newspapers, magazines, and books	13.	\$	100.00
Charitable contributions a		14.	\$	20.00
Insurance.	ina rengious uchanone			20.00
	educted from your pay or included in lines 4 or 20.			
15a. Life insurance		15a.	\$	0.00
15b. Health insurance		15b.	\$	1,605.14
15c. Vehicle insurance		15c.	\$	1,115.68
15d. Other insurance. Spec	cifv:	15d.	\$	0.00
·	s deducted from your pay or included in lines 4 or 20		·	0.00
Specify:	, , ,	16.	\$	0.00
<ol> <li>Installment or lease paym 17a. Car payments for Vel</li> </ol>		17a.	\$	1,146.15
17b. Car payments for Vel		17b.	\$	0.00
17c. Other. Specify:	IIOIC Z	176. 17c.	\$	0.00
17d. Other. Specify:		17c.	·	
	y, maintenance, and support that you did not rep		Ψ	0.00
	on line 5, S <i>chedule I, Your Income</i> (Official Form		\$	0.00
Other payments you make	e to support others who do not live with you.	1001).	\$	0.00
Specify:	,,	19.	•	0.00
. ,	ses not included in lines 4 or 5 of this form or or		ur Income.	
20a. Mortgages on other p		20a.		0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeowner	r's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair,		20d.	\$	0.00
20e. Homeowner's associa		20e.		0.00
. Other: Specify:	and of condominant acco	21.	·	0.00
			- Ψ	0.00
Calculate your monthly ex	-			
22a. Add lines 4 through 21			\$	15,000.16
22b. Copy line 22 (monthly	expenses for Debtor 2), if any, from Official Form 10	)6J-2	\$	
22c. Add line 22a and 22b.	The result is your monthly expenses.		\$	15,000.16
3. Calculate your monthly ne	et income.			
	ombined monthly income) from Schedule I.	23a.	\$	0.00
	xpenses from line 22c above.	23b.	-\$	15,000.16
		200.	T	10,000.10
	y expenses from your monthly income.	00	¢	-15 000 46
The result is your mo	nthly net income.	23c.	\$	-15,000.16
	e or decrease in your expenses within the year a finish paying for your car loan within the year or do you exper mortgage?			e or decrease because o
□ Voc Evolain he				

Fill in this infor				
Debtor 1	James Alexander			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA - SAN FERNANDO	
Case number (if known)				☐ Check if this is
				amended filing

#### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
■ No							
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)						
Under penalty of perjury, I declare that I hat that they are true and correct.	ve read the summary and schedules filed with this declaration and						
James Alexander Signature of Debtor 1	Signature of Debtor 2						
Date February 22, 2021	Date						

F	II in this inform	ation to identify you	r case:							
De	ebtor 1	James Alexande	Middle Name	Last Name						
	ebtor 2	First Name	Middle Name	Last Name						
l` '	, 0,	kruptcy Court for the:		CALIFORNIA - SAN FERNA	ANDO					
O	illeu States Dani	kruptcy Court for the.	CENTRAL DISTRICT OF	CALIFORNIA - SAN FERNA	ANDO					
	ase number known)				-	Check if this is an amended filing				
	fficial For		Affairs for Individ	luals Filing for B	ankruptcy	4/1:				
inf	ormation. If mo	nd accurate as possione space is needed, ). Answer every que	ible. If two married people a attach a separate sheet to t stion.	re filing together, both are this form. On the top of an	equally responsible for sup y additional pages, write yo	pplying correct ur name and case				
Pa	art 1: Give De	etails About Your Ma	arital Status and Where You	Lived Before						
1.	What is your	current marital statu	ıs?							
	■ Married									
	■ Not marri	ied								
2.	During the las	st 3 years, have you	lived anywhere other than v	where you live now?						
	_	□ No								
		all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	ı.					
	Debtor 1 Price	, ,	Dates Debtor 1	Debtor 2 Prior Ac		Dates Debtor 2				
			lived there	DODIO! 21 HO! AC	MI 030.	lived there				
	4501 Finley Los Angele	Ave, #406 es, CA 90025	From-To: <b>1/12/16-2/1/20</b>	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:				
	tes and territorie ■ No □ Yes. Mak	s include Árizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Off Ir Income	/ada, New Mexico, Puerto R						
4.	Fill in the total	amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	II businesses, including part	-time activities.	ndar years?				
	□ No									
	Yes. Fill i	n the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Main Document Page 30 of 46 Case number (if known) Debtor 1 James Alexander Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$340,000.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$120,000.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. Describe below. (before deductions each source (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment Total amount Amount you Was this payment for ... still owe paid **Chase Home Services** 1/21/2021 \$34,196.89 \$1,046,674.2 ■ Mortgage

700 Kansas Lane

Monroe, LA 71203

☐ Car

□ Other

☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Case 1:21-bk-10214-MB Doc 48 Filed 02/23/21 Entered 02/23/21 11:34:29 Desc Main Document Page 31 of 46

Debtor 1 James Alexander Page 31 01 40

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Chase Credit Card PO Box 6294 Carol Stream, IL 60197	1/19/2021	\$11,523.92	\$1,460.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>■ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
	Cultural Care Au Pere 1 Education Street Cambridge, MA 02141	12/23/220	\$14,947.58	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other childcare
7.	Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  No Yes. List all payments to an insider.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yo g securities; and a	u are a general partner; corporations ny managing agent, including one for
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
	model o Name and Address	bates of payment	paid	still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupter insider? Include payments on debts guaranteed or costal No  Yes. List all payments to an insider Insider's Name and Address		Total amount	Amount you	Reason for this payment
			paid	still owe	Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrupt: List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	CRED INC., CRED CAPITAL, INC., and CRED (US) LLC vs. James Alexander Adv. Proc. No: 20-51006	Turnover	US Bankruptcy Delaware	Court -	■ Pending □ On appeal □ Concluded
	Cred Inc. (f/k/a Cred LLC) and Cred Capital, Inc. v. James Alexander 20-CIV-02915	Turnover	Superior Cour	of California	■ Pending □ On appeal □ Concluded

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			·				
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		ras any of your property repossessed, foreclosed	I, garnished, attached	l, seized, or levied?		
	No. Go to line 11.						
	☐ Yes. Fill in the information below.						
	Creditor Name and Address		escribe the Property	Date	Value of the property		
		Ex	plain what happened				
11.	Within 90 days before you filed for bank accounts or refuse to make a payment in the No   ☐ Yes. Fill in the details.		did any creditor, including a bank or financial insequence you owed a debt?	stitution, set off any a	mounts from your		
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount		
Par	court-appointed receiver, a custodian, o  No Yes  List Certain Gifts and Contribution	ns					
13.	_	ruptcy,	did you give any gifts with a total value of more t	han \$600 per person?	•		
	■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$6 per person	00	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:	i					
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?						
	Yes. Fill in the details for each gift or	contribut	tion.				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed	Dates you contributed	Value		
	St. Sophia cathedral 1324 Normandy Ave Los Angeles, CA 90006		monthly parish contribution	1/11/2020	\$2,000.00		
Par	t 6: List Certain Losses						
15.		uptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,		
	_						
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property		
	how the loss occurred		e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost		

Debtor 1 James Alexander

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Page 33 of 46 Main Document Case number (if known) Debtor 1 James Alexander Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Levene, Neale, Bender, Yoo \$20,000 2/4/2021 \$20,000.00 & Brill L.L.P. 10250 Constellation Blvd. # 1700 Los Angeles, CA 90067 http://www.lnbyb.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο п Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П Yes. Fill in the details.

Code)

Type of account or

instrument

Date account was

closed, sold,

moved, or

transferred

Last 4 digits of

account number

Name of Financial Institution and

Address (Number, Street, City, State and ZIP

Last balance

transfer

before closing or

Case 1:21-bk-10214-MB Doc 48 Filed 02/23/21 Entered 02/23/21 11:34:29 Page 34 of 46 Main Document Debtor 1 Case number (if known) James Alexander 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No п Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code)

25. Have you notified any governmental unit of any release of hazardous material?

■ No

Name of site

Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Governmental unit
Address (Number, Street, City, State and

Environmental law, if you know it

Date of notice

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

Official Form 107

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Debtor 1	Debtor 1 James Alexander			number (if known)
Yes. Na	me of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declar	laration, and	I Signature (Official Form 119).

Fill	Case 1:21-bk-1021 n this information to identify y		Filed 02/23/21	Entered 02/ B7 of 46	23/21 1	1:34:29 D	esc
Debt Debt	or 1 James Alexander First Name	Middle Name Middle Name	Last Name				
	number 1:21-bk-10214-ME		iia		☐ Che	eck if this is an a	amended filing
	cial Form 122B apter 11 Staten	nent of You	r Current Mo	onthly Inc	ome		04/20
You noted	ust file this form if you are an form. Include the line number er (if known).	individual and are filing	g for bankruptcy under C Il information applies. Or	Chapter 11. If more	space is ı	•	•
1.	What is your marital and filing  Not married. Fill out Colum  Married and your spouse i	n A, lines 2-11. is filing with you. Fill out	t both Columns A and B, li				
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.						t 31. If the sult.	
				Column A Debtor 1		Column B Debtor 2	
2.	Your gross wages, salary, tips	s, bonuses, overtime, a	nd commissions (before	all \$	0.00	\$	

or farm

Column B is filled in.

Do not include payments you listed on line 3.

6. Net income from rental and other real property

Gross receipts (before all deductions)
Ordinary and necessary operating expenses

Gross receipts (before all deductions)

Ordinary and necessary operating expenses

5. Net income from operating a business, profession,

Net monthly income from a business, profession, or farm

Net monthly income from rental or other real property

Debtor 1

\$ 0.00

\$ 0.00

\$\_0.00 \$\_

Debtor 1

Debtor 2

Debtor 2

Copy

Сору

3. Alimony and maintenance payments. Do not include payments from a spouse if

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. 0.00

0.00

0.00

0.00

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Debtor 1 James Alexander Case number (if known) 1:21-bk-10214-MB

Total co		Colum Debtor		Column B Debtor 2	
8. Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:					
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	Interest, dividends, and royalties	\$	135.00	\$	
For you	Unemployment compensation	\$	0.00	\$	
For your spouse					
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent I that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  Source of the uniformed services are considered and the total below.  Source of the uniformed services are considered and the total for Column B.  Total amounts from separate pages, if any.  1. Calculate your total current monthly income.  Add lines 2 through 10 for each column.  Then add the total for Column A to the total for Column B.	For you\$0.00				
benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  1. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.    Social Security Act. 10	For your spouse				
Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  Solve Solv	benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61	\$	0.00	\$	
Total amounts from separate pages, if any.  1. Calculate your total current monthly income.  Add lines 2 through 10 for each column.  Then add the total for Column A to the total for Column B.  Total cumonthly	Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a				
1. Calculate your total current monthly income.  Add lines 2 through 10 for each column.  Then add the total for Column A to the total for Column B.  Total cumonthly		\$	0.00	\$	
Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Total comonthly		\$		\$	
Add lines 2 through 10 for each column.  Then add the total for Column A to the total for Column B.  \$\frac{135.00}{\\$} \frac{1}{\\$} \f	Total amounts from separate pages, if any.	+ \$		+ \$	
Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.     135.00   +				1	
monthly	Add lines 2 through 10 for each column.	\$	135.00		=13
Part 2: Sign Below					Total curr monthly i
Part 2: Sign Below					
	art 2: Sign Below				
	Signature of Debtor Signature of Debtor	2			
Signature of Debtor 2	Date 02/23/2021 Date MM / DD / YYYY	YYYY			

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B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Central District of California - San Fernando

In re	James Alexander	Case No.	
	Debtor(s)	Chapter	
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DI	EBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorn ompensation paid to me within one year before the filing of the petition in bankruptcy e rendered on behalf of the debtor(s) in contemplation of or in connection with the bar	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	s	20,000.00
	Prior to the filing of this statement I have received		20,000.00
	Balance Due	\$	0.00
. \$			
. Т	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
. Т	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
	I have not agreed to share the above-disclosed compensation with any other person	unless they are mem	bers and associates of my law firm
[	☐ I have agreed to share the above-disclosed compensation with a person or persons vecopy of the agreement, together with a list of the names of the people sharing in the		
. I	n return for the above-disclosed fee, I have agreed to render legal service for all aspec	ts of the bankruptcy	case, including:
b c d	<ul> <li>Analysis of the debtor's financial situation, and rendering advice to the debtor in det</li> <li>Preparation and filing of any petition, schedules, statement of affairs and plan which</li> <li>Representation of the debtor at the meeting of creditors and confirmation hearing, at</li> <li>Representation of the debtor in adversary proceedings and other contested bankrupt</li> <li>[Other provisions as needed]</li> </ul>	n may be required; nd any adjourned hea	
e	Advising the Debtor with regard to the requirements of the Bankru Rules and the Office of the United States Trustee as they pertain to certain rights and remedies of its bankruptcy estate and the rights representing the CHapter 11 Debtor in any proceeding or hearing by unless the Debtor is represented in such proceeding or hearing by examinations of witnesses, claimants or adverse parties and represented.	o the Debtor; advi s, claims and inter in the Bankruptcy y other special co	sing the Debtor with regard to ests of creditors; Court involving its estate unsel; conducting

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Matters which are outside of LNBYB's specialization, any matters outside of a Chatper 11 proceeding and any nondischargeability investigation or litigation

which may be appropriate in LNBYB's representation of the Debtor in Possession during the Chapter 11

proceeding except to the extent that any such adversary proceeding is in an area outside of LNBYB's expertise or which is beyond LNBYB's staffing capabilities; preparing and assisting the Debtor in the preparation of reports, applications, pleadings and orders including, but not limited to, applications to employ professionals, interim statements and operating reports, initial filing requirements, schedules and statement of financial affairs, lease pleadings, cash collateral pleadings, financing pleadings, and pleadings with respect to the Debtor's use, sale or lease of property outside the ordinary course of business; representing the Debtor with regard to obtaining use of debtor in possession financing and/or cash collateral including, but not limited to, negotiating and seeking Bankruptcy Court approval of any debtor in possession financing and/or cash collateral; and preparing any pleadings relating to obtaining use of debtor in possession financing and/or cash collateral; assisting the Debtor in the negotiation, formulation, preparation and confirmation of a plan of reorganization and the preparation and approval of a disclosure statement in respect of the plan; and performing any other services

bankruptcy case.

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In re	James Alexander	Case No.	1:21-bk-10214-MB
	Debtor(s)		

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete stathis bankruptcy proceeding.	atement of any agreement or arrangement for payment to me for representation of the debtor(s) in
February 23, 2021	/s/ David B. Golubchik
Date	David B. Golubchik 185520
	Signature of Attorney
	Levene, Neale, Bender, Yoo & Brill L.L.P.
	10250 Constellation Blvd., Suite 1700
	Los Angeles, CA 90067
	(310) 229-1234
	Name of law firm

Case 1:21-bk-10214-MB Doc 48 Filed 02/23/21 Entered 02/23/21 11:34:29 Desc Page 41 of 46 Main Document Attorney or Party Name, Address, Telephone & FAX Nos., FOR COURT USE ONLY State Bar No. & Email Address David B. Golubchik 185520 10250 Constellation Blvd., Suite 1700 Los Angeles, CA 90067 (310) 229-1234 California State Bar Number: 185520 CA ☐ Debtor(s) appearing without an attorney ■ Attorney for Debtor **UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - SAN FERNANDO** In re: CASE NO .: James Alexander CHAPTER: 11 **VERIFICATION OF MASTER** MAILING LIST OF CREDITORS [LBR 1007-1(a)] Debtor(s). Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 3 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions. Date: February 22, 2021 Signature of Debton 1 Date: Signature of Debtor 2 (joint debtor) ) (if applicable) Date: February 22, 2021

Signature of Attorney for Debtor (if applicable)

James Alexander 13535 Ventura Blvd Ste C, PMB 405 Sherman Oaks, CA 91423

David B. Golubchik Levene, Neale, Bender, Yoo & Brill L.L.P. 10250 Constellation Blvd., Suite 1700 Los Angeles, CA 90067

U.S. Trustee San Fernando Valley 915 Wilshire Blvd. Suite 1850 Los Angeles, CA 90017

Barclay's Bank Delaware PO BOX 8803 Wilmington, DE 19899

Buchanon Ingersoll Rooney 919 North Market Street, Suite 990 Wilmington, DE 19801

Capital One Bank USA PO BOX 31293 Salt Lake City, UT 84131

Citicard PO BOX 6241 Sioux Falls, SD 57117

Cred Inc. et al, c/o Scott Cousins, Esq. 1521 Concord Pike, Suite 301 Wilmington, DE 19803 Discover Student Loans PO BOX 30948 Salt Lake City, UT 84130

Franchise Tax Board Special Procedures POB 2952 Sacramento, CA 95812

Internal Revenue Service Insolvency I Stop 5022 300 N. Los Angeles St., #4062 Los Angeles, CA 90012-9903

JP Morgan Chase

JPMCB HOME 700 KANSAS LN Monroe, LA 71203

Los Angeles County Tax Collector P.O. Box 54018 Los Angeles, CA 90054-0018

SOFI 2750 E COTTONWOOD PKWY Salt Lake City, UT 84121

US Bank PO BOX 13 Hillsboro, OH 45133 USAA PO BOX 47504 San Antonio, TX 78265

Wells Fargo Bank PO BOX 14517 Des Moines, IA 50306

WF Credit Services PO BOX 14517 Des Moines, IA 50306

Email Add David B 10250 C	. Golubchik 185520 onstellation Blvd., Suite 1700 geles, CA 90067 9-1234	Nos., State Bar No. &	FOR COURT USE ONLY		
	tor(s) appearing without an attorney rney for Debtor(s)				
			NKRUPTCY COURT .IFORNIA - SAN FERI	NANDO	
In re: CASE NO.:					
DECLARATION BY DEBTOR(S)  AS TO WHETHER INCOME WAS RECEIVE FROM AN EMPLOYER WITHIN 60 DAYS O THE PETITION DATE  [11 U.S.C. § 521(a)(1)(B)(iv)]					
Debtor(s	s) provides the following declarations) filing this bankruptcy case (Petitic	(s) as to whether in		rom an employer within 60 days of the (a)(1)(B)(iv):	
				ving information is true and correct:	
	During the 60-day period before	the Petition Date (	Check only ONE box	below):	
	I was paid by an employer. Att employment income I received from number or bank account is on a punmber(s) before filing this declar	om my employer do eay stub or other pr	uring this 60-day perio		
	▼ I was not paid by an employer	because I was eith	ner self-employed only	v, or not employed.	
Date:	February 22, 2021	James Alexander			
Printed name of Debtor 1 Signature of Debtor 1					

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Jeclara	ation of Debtor 2 (Joint Debtor) (if applicable)	
2. □ 1 a	am Debtor 2 in this case, and I declare under penalty of perjury that	the following information is true and correct:
	During the 60-day period before the Petition Date (Check only C	ONE box below):
	☐ I was paid by an employer. Attached are copies of all statement employment income I received from my employer during this 60-number or bank account is on a pay stub or other proof of incommumber(s) before filing this declaration.)	day period. (If the Debtor's social security
	☐ I was not paid by an employer because I was either self-employer	oyed only, or not employed.
Date:		
	Printed name of Debtor 2	Signature of Debtor 2